

SECRET

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110005-0

CONTROL NO.

REPORTS INVENTORY						DDS/OF-075	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (If a fill-in report include Form No.) ADP Management Information System Report (ADP MIS Transcript Sheet Formats F-K, Aug 1967) (Feeder Report)						2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL LOGISTICS MEDICAL		TRAINING SECURITY FINANCE		ADMIN. GENERAL OTHER (specify)	
4. NO. OF COPIES PREPARED 8		5. FREQUENCY (weekly, monthly, quarterly, etc.) Semi-Annual		6. DISTRIBUTION (No. of components not number of copies) 4			
7. FORMAT (memorandum, form computer print-out, etc) Form		8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.		9. DIRECTIVE AUTHORITY REQUIRING REPORT BOB Circular No. A-83			
10. PREPARING COMPONENT (include lowest level contributing information to report) PPS				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) C&TD Report - Accomplishments in the Use of Digital Computers (6-15-70)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED = COST PER YEAR
GS-14	\$ 11.01		1		\$ 11.01		2 \$ 22.02
GS-06	3.86		1		3.86		2 7.72
						\$ 29.74	
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR						\$ 29.74	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. This is an Office level feeder report to the Directorate level feeder report, prepared by DDS/IPC, to the Agency's report to BOB. Information reported is not useful to PPS. Requirement established by BOB.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input type="checkbox"/> RETAIN AS IS <input checked="" type="checkbox"/> OTHER (explain) Continue only if required by BOB and DDS/IPC <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS MAN-HOURS DOLLARS 25X1	
16. DATE OF INVENTORY 23 Sept. 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION C/PPS				18. EXTENSION	

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(22-36-43)

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